

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Becky L. Holin
Thompson & Knight LLP
98 SAN JACINTO Blvd, Suite 1900
Austin, TX 78701

2. Article Number

(Transfer from service label)

7004 1160 0003 0353 8241

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Jeff Brown

☐ Agent☐ Addressee

B. Received by (Printed Name)

JEFF BROWN

C. Date of Delivery

8/29/11

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

RECEIVED

11 MAY 86 PM 1:18

SUPERFUND DIV.
DIRECTOR'S OFF.

- Sender: Please print your name, address, and ZIP+4 in this box •

U.S. EPA, Region 6
1445 Ross Ave, Suite 1200
DALLAS, TX 75202

ATT: S. LAPUYAN

6SF-TE

RE: Geydan



7004 1160 0003 0353 8241

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark
Here

Sent To	
Street, Apt. No.; or PO Box No.	
City, State, ZIP+4	

PS Form 3800, June 2002

See Reverse for Instructions